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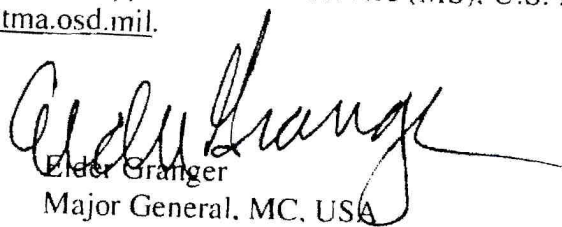
MEMORANDUM FOR UNDER SECRETARY OF DEFENSE FOR PERSONNEL
AND READINESS
UNDER SECRETARIES OF THE MILITARY
DEPARTMENTS
DIRECTOR, JOINT STAFF
CHIEF, NATIONAL GUARD BUREAU

SUBJECT: Modification of the Department of Defense Opiate Drug Testing Procedures

Recently, the Biological Testing Advisory Board reviewed heroin screening data from the past three years. This data strongly indicates that, due to cross reactivity with high levels of morphine, the reagent kit provides detection of morphine or morphine-based pharmaceuticals.

Attached is a modification of the Department of Defense opiate testing methodology which leverages the capability of the heroin screening kit to provide detection for both heroin and morphine abuse in 100 percent of the specimens submitted to the military Forensic Toxicology Drug Testing Laboratory system.

My point of contact is Colonel Ron Shippee, Medical Service (MS), U.S. Army, at (703) 681-4348, or Ronald.Shippee@tma.osd.mil.


Elder Granger
Major General, MC, USA
Deputy Director

Attachment:
As stated

TAB B

Simultaneous Analysis of Heroin Metabolites and Morphine in Urine Samples Submitted to the Military Drug Testing Laboratories

Samples submitted for testing will follow established Department of Defense (DoD) and Service Laboratory testing guidelines.

Samples that initially screen positive for the presence of 6-acetylmorphine (6AM), are subject to a rescreen analysis for the presence of both 6-AM and opiates, using the respective immunoassay screening kits at the current immunoassay calibration cutoff concentrations of 10 ng/mL 6-AM and 2,000 ng/mL morphine.

If the sample upon rescreen is presumptive positive for the presence of 6-AM only, then the sample is analyzed by gas chromatography mass spectrometry (GC-MS) for 6-AM at the confirmation cutoff concentration of 10 ng/mL.

If the sample upon rescreen fails to rescreen positive for 6-AM but is positive for the presence of opiate (codeine / morphine), then the sample will be subjected to GC-MS confirmation analysis for codeine and / or morphine at the current GC-MS confirmation cutoff concentration of 2,000 ng/mL codeine and 4,000 ng/mL morphine. If all testing meets the DoD screening and GC-MS reporting requirements, then the sample may be reported as positive for the respective opiate(s) present.

If the sample upon rescreen is positive for both the presence of 6-AM and opiates, then the sample is analyzed by GC-MS for 6-AM and opiates at the confirmation cutoff concentrations of 10 ng/mL 6-AM, 2,000 ng/mL codeine and 4,000 ng/mL morphine. If all testing meets the DoD screening and GC-MS reporting requirements, then the sample may be reported as positive for the respective drug(s) present.